

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DL		3-3-01
O.I.P.E. CLASSIFIER		12	8/15
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	SPa	852	10-08-01
	SPa	852	08-08-02

INDEX OF CLAIMS

Rejected	N	Non-elected
Allowed	I	Interference
— (Through numeral) .. Canceled	A	Appeal
÷ .. Restricted	O	Objected

Claim	Final	Original	Date
1		0/12/02	
2		1/1/02	
3		02/02/02	
4		02/02/02	
5		02/02/02	
6		02/02/02	
7		02/02/02	
8		02/02/02	
9		02/02/02	
10		02/02/02	
11		02/02/02	
12		02/02/02	
13		02/02/02	
14		02/02/02	
15		02/02/02	
16		02/02/02	
17		02/02/02	
18		02/02/02	
19		02/02/02	
20		02/02/02	
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
32			
33			
34			
35			
36			
37			
38			
39			
40			
41			
42			
43			
44			
45			
46			
47			
48			
49			
50			

Claim	Date
Final	
Original	
101	
102	
103	
104	
105	
106	
107	
108	
109	
110	
111	
112	
113	
114	
115	
116	
117	
118	
119	
120	
121	
122	
123	
124	
125	
126	
127	
128	
129	
130	
131	
132	
133	
134	
135	
136	
137	
138	
139	
140	
141	
142	
143	
144	
145	
146	
147	
148	
149	
150	

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

Claim	Date	
Final	Original	
151		
152		
153		
154		
155		
156		
157		
158		
159		
160		
161		
162		
163		
164		
165		
166		
167		
168		
169		
170		
171		
172		
173		
174		
175		
176		
177		
178		
179		
180		
181		
182		
183		
184		
185		
186		
187		
188		
189		
190		
191		
192		
193		
194		
195		
196		
197		
198		
199		
200		

Claim	Date	
Final	Original	
201		
202		
203		
204		
205		
206		
207		
208		
209		
210		
211		
212		
213		
214		
215		
216		
217		
218		
219		
220		
221		
222		
223		
224		
225		
226		
227		
228		
229		
230		
231		
232		
233		
234		
235		
236		
237		
238		
239		
240		
241		
242		
243		
244		
245		
246		
247		
248		
249		
250		